

TO: Prospective Applicants for a **Louisiana Pollutant Discharge Elimination System (LPDES) Permit** associated with Oil and Gas Exploration, Production and Development operations.

Attached is a **Fieldwide Wastewater Discharge Permit Application (FW-2)**, authorized under EPA's delegated NPDES program under the Clean Water Act. Please submit three copies (**one original and two copies**) of the completed application, cover letters, maps, molluscan surveys, etc. to:

Department of Environmental Quality
Office of Environmental Services
Post Office Box 82135
Baton Rouge, Louisiana 70884-2135
Attention: Permits Division

The application will not be considered complete unless every question on this form is addressed and the appropriate person signs the signatory page. If an item does not apply to your facility enter "NA" (for not applicable) to show that the question was considered. All pages of the application must be returned for the application to be considered complete.

The following maps must be provided with each application and on them must be marked the following:

1. **Location Map** - Must be a United States Geological Survey (U.S.G.S.) Quadrangle

Map

Indicate:

- a) the location of the facility
- b) all discharge points
- c) the effluent pathway(s) into receiving waters from the facility
- d) all intake and discharge structures
- e) each hazardous waste treatment, storage, or disposal facility
- f) injection wells
- g) all wells, springs, and other surface water bodies or drinking water wells listed

2. **Site Map** - for all facilities with permanent wastewater outfalls
(**other than stormwater runoff**)

Indicate:

- a) the location of all effluent treatment systems
- b) the location of all wastewater discharge points
- c) the effluent pathway into receiving waters
- d) the location of the front gate of the facility

3. **Oyster Lease Map** -

- a) For existing or proposed discharges of produced water within one mile of an oyster lease, oyster seed bed or live natural reef, submit a current oyster lease map of the area. Oyster lease maps are available from the Louisiana Department of Wildlife and Fisheries - (225) 568-5681. The proposed discharge location must be plotted on the map and a 1300 foot radius circle must be inscribed about the discharge location.

- b) If the applicant considers any oyster lease, live natural oyster or other molluscan reef, or designated seed bed within 1,300 feet of a discharge to be inactive, written documentation and evidence must be submitted to the state administrative authority for a determination to be made as to the acceptability of such a discharge.

4. State or Private Lease Map -

For drilling operations in areas where the Department of Natural Resources - Office of Conservation has not assigned a field designation (Wildcats), submit a lease boundary map. This map must include the well location and the section boundaries of the Section, Township and Range System or block boundaries.

A survey of molluscan resources may be required for the proposed discharge of produced water. Please refer to the application attachment labeled Molluscan Assessments - Application Requirements for more information.

Please submit a report of the applicant's water violations and enforcement actions (including but not limited to, a summary of permit excursions for the past three years, administrative orders, compliance orders, notices of violation, cease and desist orders and any other enforcement actions either already resolved or still pending). The state administrative authority may choose, at its discretion, to require a more in-depth report of violations and compliance.

All questions concerning certifications for dredge and fill operations, laying pipelines, and construction of shell pads, production platforms, etc. should be directed to the Office of Environmental Services, Post Office Box 82135, Baton Rouge, Louisiana 70884-2135, or to DEQ General Information at (888) 763-5424. Information regarding pipeline hydrostatic testing permits can be obtained from the Office of Environmental Services, Post Office Box 82135, Baton Rouge, Louisiana 70884-2135, or DEQ General Information at (888) 763-5424.

For sanitary treatment plants, the plans and specifications must be approved by the Department of Health and Hospitals. If you have not previously done so, they are to be sent to the Department of Health and Hospitals, Office of Public Health, 6867 Bluebonnet Road, Box 3, Baton Rouge, LA 70810, telephone (225) 765-5044. In accordance with L.R.S. 48:385 any discharge to a highway ditch, cross ditch, or right-of-way shall require approval from the Louisiana Department of Transportation and Development, Office of Highways, Post Office Box 94245, Baton Rouge, Louisiana 70804-9245 and from the Department of Health and Hospitals, Office of Public Health, 6867 Bluebonnet Road, Box 7, Baton Rouge, LA 70810, telephone (225) 765-5044. A copy of the LPDES regulations may be obtained from the Office of Environmental Assessment, Regulation Development Section, Post Office Box 82178, Baton Rouge, Louisiana 70884-2178, phone (225) 765-0399.

If you have any questions, please contact DEQ at (888) 763-5424.

DEPARTMENT OF ENVIRONMENTAL QUALITY
MOLLUSCAN ASSESSMENTS
APPLICATION AND NOTIFICATION REQUIREMENTS

The following application requirements concern all discharges of produced water (whether existing or proposed) as of March 20, 1991:

- 1) A current oyster lease map from the Louisiana Department of Wildlife and Fisheries (225-568-5681) must be submitted for all (whether leases are active or not) discharge points. This map must have all produced water discharge points plotted with a 1300 foot radius area identified for each point.
- 2) A molluscan survey which covers a 1300 foot radius of the discharge point must be submitted for all produced water discharge points proposed on or after March 20, 1991. A molluscan survey will not be required for discharges in existence before March 20, 1991.
- 3) A molluscan survey will not be required for areas where the discharge of produced water is not allowed. These areas include but are not limited to the areas listed below:
 - 1) Lake Pontchartrain
 - 2) All state and federal wildlife management areas, parks, or refuges.
 - 3) Waterbodies used as a drinking water supply (such as Lake Palourde).
 - 4) Waterbodies in close proximity of a Scenic Stream.
 - 5) Areas within Hurricane Protection Levee Systems.
 - 6) Coastal subcategory of the oil and gas extraction point source category

DEPARTMENT OF ENVIRONMENTAL QUALITY
MOLLUSCAN ASSESSMENTS
SURVEY REQUIREMENTS

Survey requirements for proposed discharges of produced water. This survey must cover all molluscs within 1300 feet of the proposed discharge point.

Samples shall be taken at the proposed discharge site, to the maximum extent possible, and approximately every 217 feet along segments extending from the center (discharge) point for a radius of 1300 feet in each of the cardinal directions (North, South, East, West) as well as the four quadrant bisecting segments (Northeast, Southeast, Southwest, and Northwest). This represents six samples per ray, for a total of 49 samples (6 per ray X 8 rays + center point).

A "sample" shall consist of both of the following:

1) Poling or other testing of the water bottom to determine the suitability of the substrate for molluscan propagation and the presence of molluscs and or clutch material shall be performed at the sample sites. Should suitable substrate or shell material be detected, additional testing (poling, etc.) shall be conducted to determine the extent of the area suitable for propagation and the possible presence of a subaqueous reef. Sufficient LORAN coordinates shall be taken to adequately document the extent of any reef.

2) Dredge samples, meter square samples or other suitable testing methods must be utilized at the sample sites to provide an estimation of the quantity of molluscs present in the area, a ratio of living-to-dead molluscs in the area, size groupings of both living and dead molluscs (less than 1 inch, 1-3 inches, greater than three inches) and presence of sea grass.

A report shall be submitted that contains, at a minimum, the following information:

- 1) Individual sample points:
 - A) A map with all sample points plotted on it.
 - B) The LORAN coordinates of each sample station, with adequate LORAN coordinates to delineate the extent of any molluscan reef.
 - C) A characterization of the bottom material at all sample stations (soft mud, silt, clay, sand, shell, etc.).
 - D) A listing of which stations, if any, had suitable substrate for molluscan propagation.
 - E) Information indicating the presence or absence of living and/or dead molluscs.
 - F) The number of living molluscs per sample point.
 - G) The ratio of living to dead molluscs present in the sample.
 - H) The presence of sea grass in the sample.
 - I) Type and condition of sea grass present in sample.
 - J) Color photographs of any molluscs sampled.
 - K) Type of molluscs present in sample (Common and scientific names).

Survey Requirements (cont.)

- 2) Entire sampling area:
 - A) The approximate number of living molluscs within the 1300 foot radius.
 - B) Surface and bottom water salinities at the time of sampling.
 - C) Historical surface and bottom water salinities (if available).
 - D) A presentation of the size distribution of both living and dead molluscs sampled.
Three groupings for each class - less than 1 inch, 1 to 3 inches, and greater than 3 inches.
 - E) Indicate sampling method for area (dredging, meter square, etc.)

**CHECKLIST FOR PERMIT APPLICATIONS
OIL AND GAS EXPLORATION, PRODUCTION,
AND DEVELOPMENT OPERATIONS**

1. All blanks have been answered (NA if the question was not applicable).
2. Three copies of the application, cover letter, and maps are enclosed.
3. Location maps must be a U.S.G.S Quadrangle Map or equivalent and show the location and identification of all drilling, production, and support facilities in the field.
4. Site maps must be included for all facilities with permanent wastewater outfalls (other than sheet flow stormwater runoff). This map must include the location of all effluent treatment systems, the location of all wastewater discharge points, and the effluent pathway into the receiving waters.
5. A current oyster lease map from the Louisiana Department of Wildlife and Fisheries for all proposed or existing discharges of produced water (whether leases are active or not).
6. A molluscan survey may be required for proposed discharges of drill cuttings and adhering drilling fluids or produced water. See attached application and survey requirements for information concerning molluscan assessments.
7. A lease boundary map must be submitted for drilling operations in areas where the Department of Natural Resources' Office of Conservation has not assigned a field designation (Wildcats). This map must include the well location and the Section boundary of the Section, Township, and Range.
8. Laboratory results are enclosed for all existing discharges.
9. The **appropriate** person has signed the signatory page.

ANY APPLICATION THAT DOES NOT CONTAIN ALL OF THE REQUESTED INFORMATION WILL BE DEEMED INCOMPLETE. APPLICATION PROCESSING WILL NOT PROCEED UNTIL ALL REQUESTED INFORMATION HAS BEEN SUBMITTED.

Please note that all questions concerning certifications for dredge and fill operations, laying pipelines, and construction of shell pads, production platforms, etc. should be directed to the Certification Section located at the Department of Environmental Quality Building, 7290 Bluebonnet, Post Office Box 82135, Baton Rouge, Louisiana 70884-2135, (888) 763-5424.

LWDPS Permit No. WP
NPDES/LPDES Permit No. LA

Date: _____

Please Check All Appropriate Boxes:

Initial Permit[]
Permit Modification[]
Permit Renewal[]

Proposed/New Facility[]
Existing Facility[]

Louisiana Department of Environmental Quality
Office of Environmental Services
Permits Division
Post Office Box 82135
Baton Rouge, Louisiana 70884-2135

**FIELD WIDE Louisiana Pollutant Discharge Elimination System (LPDES) Permit
Application (FW-2) FOR DISCHARGES FROM OIL AND/OR GAS
EXPLORATION, PRODUCTION AND DEVELOPMENT FACILITIES**

SECTION I. GENERAL INFORMATION

1. Legal Name of Applicant: _____
(Operator) (Firm, Partnership, Company, Corporation, etc.)
2. Facility Name: _____
3. Field name: _____
(if a Wildcat, give the block, area, State lease number, prospect, and/or location)
4. Mailing Address: _____
5. Owner of Facility _____
6. Owner's Address _____

7. Circle Facility Status Federal State Parish Municipal Public Private Other
8. Federal Tax ID Number: _____
9. Name, Title, and Phone/Fax Numbers of Local (Field) Environmental Contact
(Company Personnel)
Name: _____
Title: _____
Telephone/Fax Numbers _____

10. Name, Title, Phone Number, and Address of Person with Operational Responsibility for this field/facility or Environmental Responsibility for the Company

Name: _____

Title: _____

Telephone/Fax Numbers: _____

Mailing Address: _____

11. Facility Information:

Parish(es): _____

Physical Location (be specific) Physical Address: _____

Front Gate: **Latitude:** ____ deg. ____ min. ____ sec. **Longitude:** ____ deg. ____ min. ____ sec.

Type Facility: _____

Standard Industrial Code(s): _____

First named water body the discharge(s) will enter: _____

Materials manufactured, used, stored, or in any other way handled at this facility (including toxic materials): _____

Located on Indian lands?: _____

12. List all DEQ and/or EPA permits, permit numbers, construction approvals and compliance schedules for improvements received or applied for by the applicant or its parent corporation or this facility: _____

SECTION II. PRODUCTION FACILITY WASTEWATER DISCHARGES**PRODUCED WATER DISCHARGE DESCRIPTION**

Complete this section for each produced water discharge point using a separate sheet for each discharge point. (Please include a fieldwide map showing all produced water and sanitary waste discharges.) Note: Discharge of produced water is allowed in territorial seas only.

1. Facility Name _____
2. Is this a proposed discharge? If yes, state anticipated initiation date _____
3. Is this an existing discharge? If yes, state date of discharge initiation _____
4. Is current operator the original operator? _____ If no, please list previous operators and their time period of operation.

5. Parish _____
6. Section, Township, and Range, or Area and Block _____
7. Lambert Coordinates x= _____ y= _____
 ° ' " ° ' "
8. Latitude/Longitude _____ / _____
9. Immediate Receiving Water Body including river mile _____
10. Average Depth of Receiving Water Body _____
11. Is there an oyster lease, live natural oyster or other molluscan reef, designated oyster seed bed, or sea grass bed within 1,300 feet of the proposed discharge?

If yes, please explain. _____

Produced Water Discharge Description (continued)

RECEIVING WATER CHARACTERISTICS

12. Temperature _____

13. Chlorinity _____ ppm and/or

14. Salinity _____ ppt

PRODUCED WATER DISCHARGE

15. Flow Rate _____ Barrels/day

16. Temperature _____

17. Chlorinity _____ ppm and/or

18. Salinity _____ ppt

19. Oil and Grease _____ ppm

MOLLUSCAN SURVEYS

20. Is the molluscan survey, if required, included with the permit application? _____

Refer to the application attachment labeled Molluscan Assessments - Application and Notification Requirements for more information.

SANITARY AND DOMESTIC WASTE DISCHARGE DESCRIPTION

Complete this section for each **permanent** sanitary or domestic waste discharge point using a separate sheet for each discharge point. (Please include fieldwide map showing produced water and sanitary waste discharges.)

1. Facility Name _____
2. Is this a proposed discharge? If yes, state anticipated initiation date _____
3. Is this an existing discharge? If yes, state date of discharge initiation _____
4. Parish _____
5. Section, Township, and Range, or Area and Block _____
6. Lambert Coordinates $x_o =$ _____ $y_o =$ _____
7. Latitude/Longitude _____ / _____
8. Immediate Receiving Water Body including river mile _____

9. Average Depth of Receiving Stream _____
10. Type of Sanitation System _____

EFFLUENT CHARACTERISTICS

Provide analytical data for the following effluent characteristics for each treated sanitary waste outfall.

<u>Characteristic</u>	<u>Results</u>
BOD ₅ (mg/l)	_____
COD (mg/l) if non-contact cooling water	_____
Total Suspended Solids (mg/l)	_____
TOC(mg/l) if non-contact cooling water	_____
Fecal Coliform (colonies/100 ml)	_____
Total Residual Chlorine (if chlorine is used)	_____
pH (SU)	_____
Flow (GPD)	_____
(Intermittent Flow Yes___ No___)	

DOMESTIC WASTE

List volumes and types of domestic discharges (sinks, showers, dishwashers, washing machines, etc.). Indicate the receiving water for each, volume, and if the effluent is routed through a sanitation unit.

MISCELLANEOUS DISCHARGES

Please address the following miscellaneous wastewater types. Please indicate status (existing or potential), duration (temporary or permanent), volume (bbl/day), and the immediate receiving waterbody, including river mile, of each discharge type. Indicate NA if not applicable.

<u>DischargeType</u>	<u>Status</u>	<u>Duration</u>	<u>Volume</u>	<u>Receiving Waterbody</u>
Treated Wastewater from Drill Cuttings/Drilling Fluids Dewatering Operations and Pit Closure Activities	<hr/>	<hr/>	<hr/>	<hr/>
Produced Sand	<hr/>	<hr/>	<hr/>	<hr/>
Source Water	<hr/>	<hr/>	<hr/>	<hr/>
Stormwater Runoff/Deck Drainage	<hr/>	<hr/>	<hr/>	<hr/>
Desalinization Unit Blowdown	<hr/>	<hr/>	<hr/>	<hr/>
Non-Contact Cooling Water	<hr/>	<hr/>	<hr/>	<hr/>
Uncontam. Stormwater Runoff	<hr/>	<hr/>	<hr/>	<hr/>
Uncontam. Ambient Water	<hr/>	<hr/>	<hr/>	<hr/>
List any other discharges	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>

List production facilities which have miscellaneous discharge types (state which facilities are in upland areas):

SECTION III. DRILLING AND WORK OVER WASTEWATER DISCHARGES**DRILLING ACTIVITY**

The fieldwide permit requires **written notification for each new proposed drilling and WORK OVER activity**. Each notification will be reviewed by the state administrative authority as to its applicability under the conditions and limitations of the fieldwide permit.

1. Facility Name _____
2. Parish _____
3. Section, Township, and Range or Area and Block _____
4. Lambert Coordinates x= _____ y= _____

° ' "
° ' "
5. Latitude/Longitude _____ / _____
6. Immediate Receiving Water Body (be specific) _____
7. Average Depth of Receiving Water Body _____
8. Anticipated Spud Date _____
9. Is there an oyster lease, live natural oyster or other molluscan reef, designated oyster seed bed, or sea grass bed within 1,300 feet of the proposed discharge? _____

If yes, please explain. _____

WELL COMPLETION, TREATMENT AND WORK OVER FLUIDS

If applicable give the approximate amounts of the proposed discharges (barrels/month) and the composition of each.

SANITARY AND DOMESTIC WASTE DISCHARGE DESCRIPTION

Complete this section for each sanitary discharge point using a separate sheet for each discharge point. (Please include fieldwide map showing sanitary waste discharges.)

1. Facility Name _____
2. Parish _____
3. Section, Township, and Range, or Area and Block _____
4. Lambert Coordinates x= _____ y= _____
5. Latitude/Longitude _____ / _____
6. Immediate Receiving Water Body (be specific) _____
7. Average Depth of Receiving Water Body _____
8. Anticipated Spud Date _____
9. Is there an oyster lease, live natural oyster or other molluscan reef, designated oyster seed bed, or sea grass bed within 1,300 feet of the proposed discharge? _____
If yes, please explain. _____
10. Type of Sanitation System _____

EFFLUENT CHARACTERISTICS

Provide analytical data for the following effluent characteristics for each treated sanitary waste outfall.

<u>Characteristic</u>	<u>Results</u>
BOD ₅ (mg/l)	_____
COD (mg/l) if non-contact cooling water	_____
Total Suspended Solids (mg/l)	_____
TOC (mg/l) if non-contact cooling water	_____
Fecal Coliform (colonies/100 ml)	_____
Total Residual Chlorine (if chlorine is used)	_____
pH (SU)	_____
Flow (GPD)	_____
(Intermittent Flow Yes___ No___)	_____

DOMESTIC WASTE

List volumes and types of domestic discharges (sinks, showers, dishwashers, washing machines, etc.). Indicate the receiving water for each, volume, and if the effluent is routed through a sanitation unit.

MISCELLANEOUS DISCHARGES

Please address the following miscellaneous wastewater types. Please indicate volume (bbl/day), and the immediate receiving waterbody of each discharge type. Indicate **NA** if not applicable.

<u>Discharge Type</u>	<u>Volume</u>	<u>Receiving Waterbody</u>
1. Treated Wastewater from Drill Cuttings/Drilling Fluids Dewatering Operations and Pit Closure Activities	<hr/>	<hr/>
2. Excess Cement	<hr/>	<hr/>
3. Stormwater Runoff/Deck Drainage	<hr/>	<hr/>
4. Desalinization Unit Blowdown	<hr/>	<hr/>
5. Non-Contact Cooling Water	<hr/>	<hr/>
6. Blow-out Preventer Control Fluid	<hr/>	<hr/>
7. Uncontaminated Bilge Water <hr/>	<hr/>	<hr/>
8. Uncontaminated Ballast Water	<hr/>	<hr/>
9. Uncontaminated Stormwater Runoff	<hr/>	<hr/>
10. Uncontaminated Ambient Water	<hr/>	<hr/>
11. List any other discharges		

SECTION IV. COMPLIANCE HISTORY

12. List all of the applicant's water violations and enforcement actions (including but not limited to, a summary of permit excursions for the past two years, administrative orders, compliance orders, notices of violation, cease and desist orders and any other enforcement actions either already resolved or still pending). This Office may choose, at its discretion, to require a more in-depth report of violations and compliance.

13. List all of the applicant's Department of Environmental Quality violations and enforcement actions statewide (excluding water) for the past three years.

14. List all of the applicant's Louisiana Department of Natural Resources violations and enforcement actions statewide for the past three years.

SECTION V. SIGNATORY REQUIREMENTS

According to the Louisiana Water Quality Regulations, LAC 33:IX.2333.A and B, the following requirements shall apply to the signatory page in this application:

Chapter 23. PERMITS

Section 2333 Signatories to permit applications and reports

A. Applications. All permit applications shall be signed as follows:

1. For a corporation - by a responsible corporate officer. For the purpose of this Section, a responsible corporate officer means:
 - (a) a president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy- or decision-making functions for the corporation, or
 - (b) the manager of one or more manufacturing, production, or operating facilities employing more than 250 persons or having gross annual sales or expenditures exceeding \$25 million (in second-quarter 1980 dollars), if authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.
2. For a partnership or sole proprietorship - by a general partner or the proprietor, respectively; or
3. For a municipality, parish, State, Federal or other public agency - either a principal executive officer or ranking elected official. For the purposes of this Section a principal executive officer of a Federal agency includes:
 - (a) the chief executive officer of the agency, or
 - (b) a senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency (e.g., Regional Administrators of EPA).

B. All reports required by permits, and other information requested by the state administrative authority shall be signed by a person described in LAC 33:IX.2333.A, or by a duly authorized representative of that person. A person is a duly authorized representative of the applicant, if:

1. the authorization is made in writing by a person described in LAC 33:IX.2333.A;
2. the authorization specifies either an individual or a position having responsibility for the overall operation of the regulated facility or activity, such as a position of plant manager, operator of a well or well field, superintendent, position of equivalent responsibility, or an individual or position having overall responsibility for environmental matters for the company, (a duly authorized representative may thus be either a named individual or any individual occupying a named position); and
3. the written authorization is submitted to the state administrative authority.

C. Changes to authorization. If an authorization under LAC 33:IX.2333.B is no longer accurate because a different individual or position has responsibility for the overall operation of the facility, a new authorization satisfying the requirements of LAC 33:IX.2333.B shall be submitted to the state administrative authority prior to or together with any reports, information, or applications to be signed by an authorized representative.

D. Certification. Any person signing any document under LAC 33:IX.2333.A or B shall make the following certification:

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment for knowing violations."

SIGNATORY AND AUTHORIZATION

Pursuant to the Water Quality Regulations (specifically LAC 33:IX.2333.A and B) which became effective October 20, 1995, the state permit application must be signed by a responsible individual as described in LAC 33:IX.2333.A and B and that person shall make the following certification:

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment for knowing violations."

The applicant for this permit hereby authorizes the Department of Environmental Quality to publish the public notice for a draft permit once in the appropriate newspaper(s). In accordance with LAC 33:IX.2781.A, the applicant agrees to be responsible for the cost of publication. The newspaper(s) is authorized to invoice the applicant directly.

Signature_____

Title_____

Date_____

Telephone_____

IMPORTANT!!

To prevent any unnecessary delay in the processing of your application, please take a moment and check to be certain that the following items have been addressed and enclosed:

1. ALL blanks have been answered (NA if the question was not applicable).
2. All required maps and drawings are enclosed.
3. The appropriate person has signed the signatory page.

ANY APPLICATION THAT DOES NOT CONTAIN ALL OF THE REQUESTED INFORMATION WILL BE CONSIDERED INCOMPLETE. APPLICATION PROCESSING WILL NOT PROCEED UNTIL ALL REQUESTED INFORMATION HAS BEEN SUBMITTED.